			•					. 		09	9930	NO	
PATENT APPLICATION FEE DETERMINATION RECOR								Application or Docket Number					
Effective October 1, 2001 0 88)													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			62				F	ATE	FEE*	73.447	PATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		8A	SIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			(1)2 minus 20=		· 4a		×	X\$ 9=		OR	X\$18=	750	
INDEPENDENT CLAIMS			5 mi	nus 3 =	٠	\[\bar{\}\]	(42=	,	OR	X84±	168		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				Γ	140=		OR	+280=		
• 11	the difference	T	DTAL		OR	TOTAL							
CLAIMS AS AMENDED - PART II											OTHER		
	>,4·	(Column 3)	Si	MALL	ENTITY .	OR	SMALL	ADDI-					
۲		CLAIMS REMAINING AFTER		NUM PREVI	HEST MBER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT A	Total	AMENDMENT A	Minus		FOR	-	\times	\$9=	ree A	OR	X\$18 _₹		
Z	independent	• 5	Minus	2412	5	=	 	42=	N. C	* OR	X84≈ .		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								X	Ç.	+280=		
	XX							10TAL		8+3	TOTAL		
9	12010		•	(Colu	mn 2)	(Column 3)	ADD	IT. FEE	N IV	OR V	ADDIT. FEE		
_	10-110	CLAIMS		HIGH	EST	PRESENT			ADDI-	4		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	OUSLY FOR	EXTRA	F	ATE	TIONAL		RATE	TIONAL FEE	
	Total	·5a	Minus	(oa	.0	×	\$9= (2. 2.	OR	X\$18=\	.: ·	
MEN	Independent	. 4	Minus	•••	5_	-4		(42= °	- francis	ΟŘ	•×X84≃		
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	140=		OR	+280=		
								TOTAL	/	OR	TOTAL	- \	
ADDIT, FEEL ADDIT, FEEL													
<u> </u>		(Column 1) CLAIMS		HIG	HEST				ADDI-	ı		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER TOUSLY D FOR	PRESENT EXTRA	F	ATE	TIONAL FEE		RATE	TIONAL FEE	
DINE	Total	•	Minus	(22	£	 	\$ 9=	مقبولها در	ÖŘ	X\$18=		
É	independent		Minus	prété	5	,		(42=		OR	X84=		
١٩	FIRST PRESE	NTATION OF N	IULTIPLE DE	! ├ ─		-	1						

FORM PTO-075 (Rev. 8/01)

OR

+280=

OR ADDIT. FEE

+140=

^{*} If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** The "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "High st Number Previously Paid For" (Total or Independent) is the high st number found in the appropriate box in column 1.